

## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                         | INITIALS | ID NO.      | DATE     |
|----------------------------------|----------|-------------|----------|
| <b>FEES DETERMINATION</b>        |          |             |          |
| <b>O.I.P.E. CLASSIFIER</b>       |          | 19          | 8701     |
| <b>FORMALITY REVIEW</b>          |          | T C 3 - 883 | 09-07-01 |
| <b>RESPONSE FORMALITY REVIEW</b> | BS<br>T2 | 947         | 10/09/01 |

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

| Claim    | Date   |
|----------|--------|
| Final    | 1/1/01 |
| Original | 1/1/01 |
| 1        | ✓      |
| 2        | ✓      |
| 3        | ✓      |
| 4        | ✓      |
| 5        | ✓      |
| 6        | ✓      |
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| Claim    | Date |
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| Claim    | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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